## BIRCH, STEWART, KOLASCH & BIRCH, LLP P.O. Box 747 • Falls Church, Virginia 22040-0747 Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING

## COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor (if only one inventor is named below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

	Biveribori enabeta							
Insert Title:	AIR CONDITIONER							
Fill in Appropriate	the specification of which is attached hereto. If not attached hereto, the application is identified by the attorney docket number as set forth above and/or the following:  The specification was filled onas							
Information -	The specification		as					
For Use Without	United States A		·	and/or				
Specification	and amended of the specification		as PCT					
Attached:	International A		and was					
	amended on	(if applicable)						
	I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.  I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.  I do not know and do not believe the same was ever known or used in the United States of America before my or our invention thereof, or patented or described in any printed publication in any country before my or our invention thereof or more than one year prior to this application, that the same was not in public use or on sale in the United States of America more than one year prior to this application, that the invention has not been patented or made the subject of an inventor's certificate issued before the date of this application in any country foreign to this date of this application in any country foreign to the States of America on an application filed by me or my legal representative or assigns more than twelve months for designs) prior to this application, and that no application for patent or inventor's certificate on this invention has been filed in any country foreign to the United States of America prior to this application by me or my legal representatives or assigns, except as follows.  I hereby claim foreign priority benefits under Title 35, United States Code, §119(a)-(d) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:  Priority Claimed							
Information:			<del></del>		- 🖰	<u>,</u>		
(if appropriate)	(Number)	(Country)		(Month/Day/Year Filed)	Yes	No		
	(Number)	(Country)	•	(Month/Day/Year Filed)	- <u>-</u> Yes	No		
	(	(====,,,		` ' '	_			
	(Number)	(Country)		(Month/Day/Year Filed)	- □ Yes	□ No		
	(Number)	(Country)		(Month/Day/Year Filed)	- D Yes	□ No		
	I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional applications(s) listed below.							
Insert Provisional Application(s): (if any)	(Application Number) (Filing Date)					<del></del>		
	(Application Number) (Filing Date)							
	All Foreign Applications, if any, for any Patent or Inventor's Certificate Filed More than 12 Months (6 Months for Designs) Prior to the Filing Date of This Application:							
	Country		Application Number	Date of Filing	(Month/Day/Year)			
Insert Requested Information: (if appropriate)								
	I hereby claim the benefit under Title 35, United States Code, §120 of any United States and/or PCT application(s), including for continuation-in-part application(s) listed below and, insofar as the subject matter of each of the claims of this application is no disclosed in the prior United States and/or PCT application in the manner provided by the first paragraph of Title 35, United State Code, §112, I acknowledge the duty to disclose information which is material to the patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.							
Insert Prior U.S. Application(s): (if any)	(Application Number	er)	(Filing Date)	(Status - pater	atented, pending, abandoned)			
Page 1 of	(Application Numb	er)	(Filing Date)	(Status - paten	atented, pending, abandoned)			

I hereby appoint the practitioners at CUSTOMER NO. 02292 as my attorneys or agents to prosecute this application and/or an international application based on this application and to transact all business in the United States Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the practitioners, unless the inventor(s) or assignee provides said practitioners with a written hotice to the contrary:

Send Correspondence to:

## BIRCH, STEWART, KOLASCH & BIRCH, LLP or CUSTOMER NO. 02292

P.O. Box 747 • Falls Church, Virginia 22040-0747

Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING:

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

			•					
rull Name of First or Sole Inventor: need Name of Inventor →	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*				
Inventor  Inventor  Insert Date This Document is Signed	Dae-Hwan CHOI	Dal-Hwon		200t.6.13				
mert Residence mert Cliizenship →	Residence (City, State & Country)		CITIZENSHI	2				
	Busan, Korea	. •	Republic o	f Korea				
nsert Post Office Address →	MAILING ADDRESS (Complete Street Address including City, State & Country)  Hwamyeongjugong Apt. 37-210, Hwamyeong-Dong, Buk-Gu, 616-783 Busan, Korea							
ull Name of Second	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*				
Inventor, if any: see above	Kyungsoo LEE	Lyungseo		June 13,2005				
	Residence (City, State & Country)	1	CITIZENSHI					
	Busan, Korea		Republic	i Korea				
•	MAILING ADDRESS (Complete Street Address 705-17, Sujeong 3-Dong, Dong-Gu, 601	-817 Busan, Korea						
udi Name of Third Inventor, if any: see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*				
	Yoon-Seob EOM	Youn	•	2005.6.13				
	Residence (City, State & Country)		CITIZENSHI					
	Changwon, Gyeongsangnam-Do, Korea	Republic of Korea						
	MAILING ADDRESS (Complete Street Address including City, State & Country) Wooseong Apt. 101-1006, Namyang-Dong, 641-091 Changwon, Gyeongsangnam-Do, Korea							
full Name of Fourth Inventor, if any: see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*				
	Jeong-Hwan KOO	Hwan		2005.6.13				
	Residence (City, State & Country)	CITIZENSHIP						
	Busan, Korea	Republic of Korea						
	MAILING ADDRESS (Complete Street Address including City, State & Country) 1346-22, 18-4, Daeyeon 5-Dong, Nam-Gu, 608-808 Busan, Korea							
rull Name of Fifth Inventor, if any:	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*				
son above	Jun-Sang RYU	Ryu		2005. 6. 13				
	Residence (City, State & Country)	CITIZENSHIP						
	Goyang, Gyeonggi-Do, Korea	Republic of Korea						
	MAILING ADDRESS (Complete Street Address including City, State & Country) Hanil Apt. 505-1101, Juveop 2-Dong, Ilsan-Gu, 411-372 Govang, Gveonggi-Do, Korea							
full Name of South Inventor, if any: see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*				
	Residence (City, State & Country)	CITIZENSHIP						
e Territoria	MAILING ADDRESS (Complete Street Address	ncluding City, State & Country)	يد مداد	ar mer var saale				

Page 2 of \_\_\_ (Rev. 07/2003)

\*DATE OF SIGNATURE